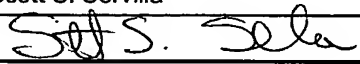


UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. BRECO 3.0-004	
		First Inventor Rudolph Schoendienst	
		Title SUSPENSION TRACK BELT	
		Express Mail Label No. EV 312606665 US	
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
		<div style="text-align: right; font-size: small; transform: rotate(90deg);">22390 U.S. PTO 10/22/75</div> <div style="text-align: right; font-size: small;">112603</div> <div style="text-align: center; border: 1px solid black; padding: 2px;">ACCOMPANYING APPLICATION PARTS</div> <div style="font-size: small;">9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</div> <div style="font-size: small;">10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</div> <div style="font-size: small;">11. <input type="checkbox"/> English Translation Document (if applicable)</div> <div style="font-size: small;">12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations</div> <div style="font-size: small;">13. <input type="checkbox"/> Preliminary Amendment</div> <div style="font-size: small;">14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</div> <div style="font-size: small;">15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</div> <div style="font-size: small;">16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i): Applicant must attach form PTO/SB/35 or its equivalent.</div> <div style="font-size: small;">17. <input type="checkbox"/> Other: <div style="border: 1px solid black; height: 20px; width: 150px;"></div></div>	
7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)			
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)			
a. <input type="checkbox"/> Computer Readable Form (CRF)			
b. Specification Sequence Listing on:			
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or			
ii. <input type="checkbox"/> Paper			
c. <input type="checkbox"/> Statements verifying identity of above copies			
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)			
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
3. <input checked="" type="checkbox"/> Specification [Total Pages 16] (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the invention- Brief Summary of the invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure			
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 9]			
5. Oath or Declaration [Total Sheets 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).			
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ Prior application information: Examiner _____ Art Unit: _____ For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
19. CORRESPONDENCE ADDRESS			
1. <input checked="" type="checkbox"/> Customer Number: 000530 OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	Zip Code
Country		Telephone	Fax
Name (Print/Type) Scott S. Servilla		Registration No. (Attorney/Agent) 40,806	
Signature Scott S. Servilla		Date	November 26, 2003

FEE TRANSMITTAL for FY 2004				C mplete if Known																																																				
Effective 10/01/2003, Patent fees are subject to annual revision.				Application Number		Not Yet Assigned																																																		
<div style="display: flex; align-items: center;"><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div>				Filing Date		Concurrently Herewith																																																		
				First Named Inventor		Rudolph Schoendienst																																																		
				Examiner Name		Not Yet Assigned																																																		
				Art Unit		N/A																																																		
TOTAL AMOUNT OF PAYMENT		(\$)		601.00		Attorney Docket No.		BRECO 3.0-004																																																
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																				
<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None</div><div><input checked="" type="checkbox"/> Deposit Account:</div></div> <div style="margin-top: 5px;">Deposit Account Number: 12-1095</div> <div style="margin-top: 5px;">Deposit Account Name: Lerner, David, Littenberg, Krumholz & Mentlik, LLP</div> <div style="margin-top: 5px;">The Director is authorized to: (check all that apply)</div> <div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> Charge fee(s) indicated below</div><div><input checked="" type="checkbox"/> Credit any overpayments</div></div> <div style="margin-top: 5px;"><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application</div> <div style="margin-top: 5px;"><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</div>				3. ADDITIONAL FEES																																																				
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<table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td style="text-align: right;">385.00</td></tr><tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5" style="text-align: right; font-weight: bold;">SUBTOTAL (1)</td><td style="text-align: right;">(\$)</td><td style="text-align: right;">385.00</td></tr></tbody></table>				Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	770	2001	385	Utility filing fee	385.00	1002	340	2002	170	Design filing fee		1003	530	2003	265	Plant filing fee		1004	770	2004	385	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)					(\$)	385.00						
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**or number previously paid, if greater; For Reissues, see above																																																								
SUBMITTED BY				(Complete (if applicable))																																																				
Name (Print/Type)		Scott S. Servilla		Registration No. (Attorney/Agent)		40,806		Telephone		(908) 518-6388																																														
Signature								Date		November 26, 2003																																														